Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
TOTAL OLABAG			(Column 1)		(Colu	(Column 2)		TYPE				ENTITY	
TOTAL CLAIMS					3			RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			_ minus 20=		*			X\$ 9=		OR,	X\$18=		
INDEPENDENT CLAIMS			minus 3 =		*			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PI			RESENT					+140=	<u> </u>	OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2					column 2	l	TOTAL		OR	TOTAL			
	CLAIMS AS AMENDED - PART II						OTHER THA						
		(Column 1)	(Colum			(Column 3)		SMALL		OR	SMALL	ENTITY	
<b>AMENDMENT'A</b>		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	· ADDI- TIONAL FEE	
Š	Total	+ 16	Minus	** 2	20	=		X\$ 9=		OR	X\$18=	_	
AM	Independent	TATION OF MI	Minus		3			X42=		OR	X84=	_	
			JEIN EE DE	LINDEIN	QDAIIVI			+140=		OR	+280=		
								TOTAL ADDIT, FEE		OR	TOTAL		
		(Column 1)		(Colur	nn 2)	(Column 3)	<i>'</i>	ADDII. FEE		•	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 18	Minus	** 2	20	=		X\$ 9=		OR	X\$18=		
	Independent	<u>・                                    </u>	Minus	***	3_	=		X42=		OR	X84=		
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM			.110		/	. 000		
						L	+140= TOTAL		OR	+280=			
							Δ	DDIT. FEE		OR ,	TOTAL ADDIT. FEE		
		(Column 1)	Samuelan with the same	(Colun		(Column 3)						,	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	I	X42=		ŀ	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					-			OR	7.04-			
* 1	* If the entry in column 1 is loss than the entry in astume 2, write 50% is selvere 2							+140=	· .	OR	+280=		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."						A	TOTAL DDIT. FEE		OR A	TOTAL DDIT. FEE		
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

**Application or Docket Number** 

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE		OR		ER THAN LL ENTITY	
FOR		NUMB	ER FILED	NUMBER I	NUMBER EXTRA		FEE	]	RATE	FEE	
BASIC FEE			1.			1	345.00	OR	a Maria	690.00	
то	TAL CLAIMS		Minus :		X\$ 9:	=	OR	X\$18=			
IND	EPENDENT CL	AIMS	minus 3 = *			X39=	:	OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT					+130:	=	OR	+260=			
* If the difference in column 1 is less than zero, enter "0" in column 2							L	OR	TOTAL	1090	
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)						SMAL	L ENTITY	OR	OTHER SMALL		
		CLAIMS		HIGHEST	(Joidini) of		ADDI-	1		ADDI-	
AMENDMENT A	an karal	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE			RATE	TIONAL	
	Total	•	Minus	**	±	X\$ 9:	=	OR	X\$18=		
	Independent	*	Minus	***	=	X39=		OR	X78=		
G .	FIRST PRESE	NIATION OF M	IOLTIPLE DE	PENDENT CLAIM		+130	=	OR	+260=		
			TOT		OR	TOTAL					
							EE		ADDIT. FEE		
	Section 1	(Column 1) CLAIMS		(Column 2)  HIGHEST	(Column 3)			,			
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	##	=	X\$ 9	=	OR	X\$18=		
AME	Independent	*	Minus	***	=	X39=	=	OR	X78=		
_	FIRST PRESE	NTATION OF N	MULTIPLE DE	PENDENT CLAIM		100		1	+260=		
						+130		OR		ļ	
		TO1 ADDIT. F		OR	TOTAL ADDIT. FEE						
		(Column 1)		(Column 2)	(Column 3)				-		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	=	X\$ 9		OR	X\$18=		
	Independent	•	Minus	***	=	X39-	=	OR	X78=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							┧┈	<b> </b>	1	
	16 Abo 0045 in 10 A	+130		OR	+260=	<u> </u>					
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  TOTAL ADDIT. FEE ADDIT. FEE  TOTAL AD											